

Rubberlite

Incorporated

Rubberlite Credit Application	Issue 2	01/25/06
-------------------------------	---------	----------

Part I: COMPANY INFORMATION (Mandatory)

COMPANY NAME: _____

BILLING ADDRESS: _____
(PLEASE INCLUDE: CITY, STATE, & ZIP CODE)

SHIPPING ADDRESS: _____
(PLEASE INCLUDE: CITY, STATE, & ZIP CODE)

TELEPHONE: _____ **FAX:** _____

TYPE OF ENTITY: _____ **STATE OF INC.** _____ **DATE OF INC:** _____
(PARTNERSHIP, PROPRIETORSHIP, OR CORPORATION)

D&B NUMBER: _____ **TAXABLE:** _____ **NON-TAXABLE:** _____

CREDIT LINE REQUESTED: _____ **ESTIMATED MONTHLY PURCHASES** _____

KEY MANAGEMENT: (NAME & TITLE) _____

COMPANY CONTROLLER: _____ **CONTROLLER E-MAIL:** _____

A/P CONTACT: _____ **A/P E-MAIL:** _____

PURCHASING CONTACT: _____ **PURCHASING E-MAIL:** _____

Part II: CREDIT REFERENCES (Please fill out the below information completely or attach your own form. Attached form must include an up-to-date fax number.)

BANK REFERENCE: _____ **PHONE:** _____

1.) **NAME:** _____

ADDRESS: _____

PHONE: _____ **FAX:** _____

2.) **NAME:** _____

ADDRESS: _____

PHONE: _____ **FAX:** _____

3.) **NAME:** _____

ADDRESS: _____

PHONE: _____ **FAX:** _____

THE ABOVE INFORMATION IS PROVIDED FOR THE PURPOSE OF OBTAINING CREDIT INFORMATION AND IS WARRANTED TO BE TRUE. WE HEREBY AUTHORIZE THE FIRM TO WHOM THIS APPLICATION IS MADE TO INVESTIGATE THE REFERENCES LISTED RELATING TO MY/OUR CREDIT AND FINANCIAL RESPONSIBILITY.

SIGNATURE: _____ **TITLE:** _____

NAME: _____ **DATE:** _____

Please return completed application via fax to 304-525-6620.

PO Box 2965 * Huntington, WV 25728 * Phone (304) 525-3116 * Fax (304) 523-4316 * www.rubberlite.com

C:\Documents and Settings\kross\Local Settings\Temporary Internet Files\OLK3E6\Rubberlite Credit Application.doc